



FY 2018 Pediatric Cancer Research Grant Program Application

The mission of the Pediatric Cancer Research Trust Fund is to enhance efforts to reduce pediatric cancer incidence and mortality. These efforts target the program needs and challenges specific to population groups and geographic regions.

Eligible grant applicants include non-profit entities, educational institutions and government agencies in the Commonwealth of Kentucky. Each applicant must offer research or treatment that seeks to address the needs of the Commonwealth.

The following program/service criteria will be taken into consideration:

- Must be relevant to the mission of the Pediatric Cancer Research Trust Fund;
- Must offer a program or service in the areas of research and/or treatment;
- Must propose to address the following areas that the Board has identified (Research and/or Treatment)
- First preference will be given to translational research in clinical demonstration projects.

Include the following information along with grant cover sheet:

Project Description

1. State the need for the research or treatment.
2. List the goals and objectives of the study including how many children you expect to serve.
3. Preference will be given to applications showing process in coordination and communication to assure no duplication of effort.
4. List the outcomes directly related to the changes or impact of the research or treatment.
5. Provide an implementation plan describing how you will meet your objectives.
6. Provide an incremental timeline including a start and end date for the research or treatment.
7. Include your evaluation plan and describe how you will measure the success of the research or treatment.
8. Provide a breakdown of budget activity.

The following criteria for screening will be utilized by the objective review committee in determination of awarding funds to grantees.

The Pediatric Cancer Research Trust Fund Screening Criteria

1. Project is relevant to the mission of the Pediatric Cancer Research Trust Fund for research and treatment for pediatric cancer patients.
2. Project offers a program or service in the areas of research and/or treatment.
3. Preference will be given to projects which directly address the prioritized list of objectives identified in the Kentucky Cancer Action Plan.
 - a. Percent of Kentucky pediatric oncology patients seen at Children's Oncology Group facilities
 - b. Number of Kentucky pediatric oncology patients evaluated at Long-Term Follow Up clinics
 - c. Five year survival rate of Kentucky childhood cancer patients
 - d. Number of Kentucky specific resource guides available to pediatric cancer patients and their families/caregivers
 - e. Number of instructional hours offered under Kentucky's home/hospital instruction programs
 - f. Number of statewide networking and professional development meetings of childhood cancer advocates and professionals
4. Goals and objectives are clearly outlined, specific, measurable, achievable, realistic and timely.
5. Implementation plan is clearly outlined.
6. Timelines are realistic to meet objectives.
7. Evaluation plans are clearly defined.
8. Program or service is not being duplicated and budget is outlined and appropriate.
9. Applications, including budget, NOT to exceed 10 pages.
10. What type of impact the project will have on the community in serving the mission of the Trust Fund.

The following information provides detail on regulations of funding received by the Pediatric Cancer Research Trust Fund.

Financial Information

1. Detailed budget of requested funds not exceeding \$15,000.
2. Purchase of food is not an approved expense covered in the reimbursement process.
3. Indirect costs are not an approved expense covered in the reimbursement process.
4. Other funding sources for this program or service including in-kind participation.
5. Grantees are required to include the following statement on **all** promotional materials:
"Printed with Pediatric Cancer Research Trust Funds".

Financial Reimbursement Process

1. Invoice on activity performed by grantee shall be submitted to the Division of Prevention and Quality Improvement, Chronic Disease Prevention Branch.
2. Invoice is reviewed by the Chronic Disease Prevention Branch for appropriate spending in accordance with the budget submitted.
3. Once invoice is approved for payment, a check will be processed within 30 days.

4. There will be financial site reviews on all grantees performed at least once during the fiscal year grant period. This will include a review of purchases made with grant funds, proof of receipt for line items included on approved budget, and the progress in which the project has provided.
5. The Board has the right to request proof of receipt at any time an audit is required/ necessary. While receipts are not required with invoices for reimbursement, it is strongly recommended that grantees keep proof of receipt for all transactions.
6. Grantee will provide a summation of progress and achievement of outcomes at the April 2018 PCRTF Board meeting and will provide a written report by the end of July 2018.

References/Data Resources:

- KRS 211.595 – 211.597 Pediatric Cancer Research Trust Fund
<http://www.lrc.ky.gov/statutes/chapter.aspx?id=38167>
- 902 KAR 21:030 Pediatric Cancer Research and Treatment Grant Program
<http://www.lrc.ky.gov/kar/902/021/030reg.htm>
- Kentucky Cancer Consortium, Cancer Action Plan:
<http://www.kycancerc.org/canceractionplan/canceractionplan.pdf>
- American Cancer Society: <http://www.cancer.org/>
- Centers for Disease Control and Prevention: <https://www.cdc.gov/index.htm>
- Kentucky Cancer Registry website: www.kcr.uky.edu

Applications are due and to be postmarked by Friday, September 15, 2017.

Submissions and approval process:

Mail one original signed copy to:

**The Pediatric Cancer Research Trust Fund
Kentucky Department for Public Health
Division of Prevention and Quality Improvement
Chronic Disease Prevention Branch
Janet C. Luttrell
275 East Main Street, HS2WE
Frankfort, Ky. 40621**

1. Faxed copies will not be accepted. An Objective Review Committee will review and score all applications with the Board making final funding decisions.
2. Successful applicants will be notified within ninety (90) days after application deadline, in writing, by certified mail. Grant agreements will also be distributed for signature by successful applicants and must be signed, submitted back to the Chronic Disease Prevention Branch and postmarked within two (2) weeks of receipt. Incomplete applications will not be considered and will be returned.
3. Any grant recipient that is not making satisfactory progress toward meeting grant objectives, as determined by the Board, shall be notified in writing that objectives are not

being met. The grant recipient shall submit to the Board within thirty (30) days of receiving the notice a corrective action plan addressing the objectives that are not being met; and reimburse the Board for grant funds received to date if the corrective action plan is not implemented.

4. CHFS Institutional Review Board (IRB) approval is required prior to project implementation for research projects.
5. If you have further questions, please call the Kentucky Department for Public Health, Division of Prevention and Quality Improvement, Chronic Disease Prevention Branch at 502-564-7996 extension 4441.
6. Grantees are responsible for notifying the Chronic Disease Prevention Branch with changes in grantee information including contact information. If any changes occur to address, email, phone number, contact name, etc...it is the grantees responsibility to inform the Board of this change within ten (10) business days of the change.